

AMENDED IN SENATE AUGUST 31, 2015

AMENDED IN SENATE JUNE 25, 2015

CALIFORNIA LEGISLATURE—2015–16 REGULAR SESSION

ASSEMBLY BILL

No. 664

Introduced by Assembly Member Dodd

(Principal coauthor: Senator Hancock)

February 24, 2015

An act to amend Section 14186.36 of the Welfare and Institutions Code, relating to Medi-Cal.

LEGISLATIVE COUNSEL'S DIGEST

AB 664, as amended, Dodd. Medi-Cal: universal assessment tool report.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care services, including, among other services, home- and community-based services. The Medi-Cal program is, in part, governed and funded by federal Medicaid Program provisions.

Existing law, until July 1, 2017, requires the State Department of Health Care Services, the State Department of Social Services, and the California Department of Aging to establish a stakeholder workgroup, as prescribed, to develop a universal assessment process, including a universal assessment tool, to be used for home- and community-based services. *No later than March 1, 2014, existing law requires the State Department of Health Care Services, the State Department of Social Services, and the California Department of Aging to report to the Legislature on the stakeholder workgroup's progress in developing the*

universal assessment process and to identify the counties and beneficiary categories for which the universal assessment process may be implemented. No sooner than January 1, 2015, upon completion of the design and development of that universal assessment tool, existing law authorizes managed care health plans, counties, and other home- and community-based services providers to test the use of the tool for certain beneficiaries in no fewer than 2, and no more than 4, specified counties if certain conditions have been met. No later than 9 months after the implementation of the universal assessment process, existing law requires the State Department of Health Care Services, the State Department of Social Services, and the California Department of Aging, to report to the Legislature on the results of the initial use of the universal assessment process.

This bill would extend the operation of these provisions until December 31, 2017. The bill would also require, on or before January 1, 2017, the State Department of Health Care Services, the State Department of Social Services, and the California Department of Aging, in consultation with the stakeholder workgroup described above, to evaluate and report to the Legislature on the outcomes of, and lessons learned from, the universal assessment tool pilot authorized by the provisions described above. September 1, 2018. The bill would instead require the State Department of Health Care Services, the State Department of Social Services, and the California Department of Aging to report to the Legislature on the stakeholder workgroup's progress no later than December 1, 2016. The bill would instead require the State Department of Health Care Services, the State Department of Social Services, and the California Department of Aging to report to the Legislature on the results of the initial use of the universal assessment process no later than 15 months after the implementation of the universal assessment process. The bill would require ~~the~~ this report to include, among other things, findings from consumers assessed using the universal assessment tool ~~and findings from consumers choosing to be assessed using previous assessment tools.~~ regarding their satisfaction of the universal assessment process.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. Section 14186.36 of the Welfare and Institutions
2 Code is amended to read:

3 14186.36. (a) It is the intent of the Legislature that a universal
4 assessment process for LTSS be developed and tested. The initial
5 uses of this tool may inform future decisions about whether to
6 amend existing law regarding the assessment processes that
7 currently apply to LTSS programs, including IHSS.

8 (b) (1) In addition to the activities set forth in paragraph (9) of
9 subdivision (a) of Section 14186.35, county agencies shall continue
10 IHSS assessment and authorization processes, including making
11 final determinations of IHSS hours pursuant to Article 7
12 (commencing with Section 12300) of Chapter 3 and regulations
13 promulgated by the State Department of Social Services.

14 (2) No sooner than January 1, 2015, for the counties and
15 beneficiary categories specified in subdivision (e), counties shall
16 also utilize the universal assessment tool, as described in
17 subdivision (c), if one is available and upon completion of the
18 stakeholder process, system design and testing, and county training
19 described in subdivisions (c) and (e), for the provision of IHSS
20 services. This paragraph shall only apply to beneficiaries who
21 consent to the use of the universal assessment process. The
22 managed care health plans shall be required to cover IHSS services
23 based on the results of the universal assessment process specified
24 in this section.

25 (c) (1) No later than June 1, 2013, the department, the State
26 Department of Social Services, and the California Department of
27 Aging shall establish a stakeholder workgroup to develop the
28 universal assessment process, including a universal assessment
29 tool, for home- and community-based services, as defined in
30 subdivision (b) of Section 14186.1. The stakeholder workgroup
31 shall include, but not be limited to, consumers of IHSS and other
32 home- and community-based services and their authorized
33 representatives, managed care health plans, counties, IHSS, MSSP,
34 and CBAS providers, area agencies on aging, independent living
35 centers, and legislative staff. The universal assessment process
36 shall be used for all home- and community-based services,
37 including IHSS. In developing the process, the workgroup shall
38 build upon the IHSS uniform assessment process and hourly task

1 guidelines, the MSSP assessment process, and other appropriate
2 home- and community-based assessment tools.

3 (2) (A) In developing the universal assessment process, the
4 departments described in paragraph (1) shall develop a universal
5 assessment tool that will inform the universal assessment process
6 and facilitate the development of plans of care based on the
7 individual needs of the consumer. The workgroup shall consider
8 issues including, but not limited to, the following:

9 (i) The roles and responsibilities of the health plans, counties,
10 and home- and community-based services providers administering
11 the assessment.

12 (ii) The criteria for reassessment.

13 (iii) How the results of new assessments would be used for the
14 oversight and quality monitoring of home- and community-based
15 services providers.

16 (iv) How the appeals process would be affected by the
17 assessment.

18 (v) The ability to automate and exchange data and information
19 between home- and community-based services providers.

20 (vi) How the universal assessment process would incorporate
21 person-centered principles and protections.

22 (vii) How the universal assessment process would meet the
23 legislative intent of this article and the goals of the demonstration
24 project pursuant to Section 14132.275.

25 (viii) The qualifications for, and how to provide guidance to,
26 the individuals conducting the assessments.

27 (B) The workgroup shall also consider how this assessment may
28 be used to assess the need for nursing facility care and divert
29 individuals from nursing facility care to home- and
30 community-based services.

31 (d) No later than ~~March 1, 2014~~, *December 1, 2016*, the
32 department, the State Department of Social Services, and the
33 California Department of Aging shall report to the Legislature on
34 the stakeholder workgroup's progress in developing the universal
35 assessment process, and shall identify the counties and beneficiary
36 categories for which the universal assessment process may be
37 implemented pursuant to subdivision (e).

38 (e) (1) No sooner than January 1, 2015, upon completion of
39 the design and development of a new universal assessment tool,
40 managed care health plans, counties, and other home- and

1 community-based services providers may test the use of the tool
2 for a specific and limited number of beneficiaries who receive or
3 are potentially eligible to receive home- and community-based
4 services pursuant to this article in no fewer than two, and no more
5 than four, of the counties where the provisions of this article are
6 implemented, if the following conditions have been met:

7 (A) The department has obtained any federal approvals through
8 necessary federal waivers or amendments, or state plan
9 amendments, whichever occurs later.

10 (B) The system used to calculate the results of the tool has been
11 tested.

12 (C) Any entity responsible for using the tool has been trained
13 in its usage.

14 (2) To the extent the universal assessment tool or universal
15 assessment process results in changes to the authorization process
16 and provision of IHSS services, those changes shall be automated
17 in the Case Management Information and Payroll System.

18 (3) The department shall develop materials to inform consumers
19 of the option to participate in the universal assessment tool testing
20 phase pursuant to this paragraph.

21 ~~(4) On or before January 1, 2017, the department, the State~~
22 ~~Department of Social Services, and the California Department of~~
23 ~~Aging shall, in consultation with the workgroup described in~~
24 ~~subdivision (e), evaluate and report to the Legislature on the~~
25 ~~outcomes of, and lessons learned from, the universal assessment~~
26 ~~tool pilot authorized by this subdivision. The report shall comply~~
27 ~~with Section 9795 of the Government Code. At a minimum, the~~
28 ~~report shall include all of the following:~~

29 ~~(A) Findings from consumers assessed using the universal~~
30 ~~assessment tool. Interviews with consumers who chose to be~~
31 ~~assessed using the universal assessment tool shall be conducted~~
32 ~~to evaluate all of the following:~~

33 ~~(i) The level of satisfaction consumers experienced with the~~
34 ~~universal assessment tool as compared to the previous assessment~~
35 ~~approach.~~

36 ~~(ii) The level of satisfaction consumers experienced with the~~
37 ~~assessor from either the county or the managed care plan.~~

38 ~~(iii) The ability of consumers to understand and respond to the~~
39 ~~assessor administering the universal assessment tool for the~~
40 ~~duration of the assessment.~~

1 ~~(iv) Any challenges experienced by consumers during the~~
2 ~~administration of the universal assessment tool.~~

3 ~~(B) Findings from consumers choosing to be assessed using~~
4 ~~previous assessment tools. Interviews with consumers who chose~~
5 ~~to be assessed using previous assessment tools shall be conducted~~
6 ~~to evaluate both of the following:~~

7 ~~(i) Reasons why the consumer chose to be assessed using the~~
8 ~~previous assessment tools.~~

9 ~~(ii) Concerns the consumer may have had with the universal~~
10 ~~assessment tool determining the services to be provided.~~

11 ~~(C) Data on the amount and type of services identified by the~~
12 ~~previous assessment tools as compared to the amount and types~~
13 ~~of services determined through the universal assessment tool, in~~
14 ~~order to better understand any discrepancies that may exist between~~
15 ~~the assessment approaches.~~

16 ~~(D) Data on the home- and community-based services utilization~~
17 ~~and costs of consumers before and after the use of the universal~~
18 ~~assessment tool, in order to better understand how the universal~~
19 ~~assessment tool may impact the home- and community-based~~
20 ~~services system.~~

21 ~~(E) Data on the percentage of consumers who experience~~
22 ~~hospitalizations and skilled nursing facility stays over a specific~~
23 ~~time period before and after the use of the universal assessment~~
24 ~~tool, in order to better understand how the universal assessment~~
25 ~~tool may impact acute care utilization.~~

26 (f) The department, the State Department of Social Services,
27 and the California Department of Aging shall implement a
28 rapid-cycle quality improvement system to monitor the
29 implementation of the universal assessment process, identify
30 significant changes in assessment results, and make modifications
31 to the universal assessment process to more closely meet the
32 legislative intent of this article and the goals of the demonstration
33 project pursuant to Section 14132.275.

34 (g) Until existing law relating to the IHSS assessment process
35 pursuant to Article 7 (commencing with Section 12300) of Chapter
36 3 is amended, beneficiaries shall have the option to request an
37 additional assessment using the previous assessment process for
38 those home- and community-based services and to receive services
39 according to the results of the additional assessment.

1 (h) (1) No later than ~~nine~~ 15 months after the implementation
2 of the universal assessment process, the department, the State
3 Department of Social Services, and the California Department of
4 Aging, in consultation with stakeholders, shall report to the
5 Legislature on the results of the initial use of the universal
6 assessment process, and may identify proposed additional
7 beneficiary categories or counties for expanded use of this process
8 and any necessary changes to provide statutory authority for the
9 continued use of the universal assessment process. These
10 departments shall report annually thereafter to the Legislature on
11 the status and results of the universal assessment process. *At a*
12 *minimum, the report shall include, but not be limited to, all of the*
13 *following:*

14 (A) *Findings from consumers assessed using the universal*
15 *assessment tool regarding their satisfaction with both the universal*
16 *assessment process and the assessor.*

17 (B) *Analysis of the consumers' ability to follow and accurately*
18 *respond to all assessment items.*

19 (C) *Data collected from the universal assessment process that*
20 *is compared to previous assessment tool data and this information*
21 *shall be reported to distinguish the impact of the universal*
22 *assessment process through the new data collection process.*

23 (2) *A report submitted pursuant to this subdivision shall be*
24 *submitted in compliance with Section 9795 of the Government*
25 *Code.*

26 (i) This section shall remain operative only until ~~December 31,~~
27 ~~2017.~~ *September 1, 2018.*